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Bib Data Sheet

CONFIRMATION NO. 9272

| SERIAL NUMB I 10/697,829 | ER | FILING OR 371(c) DATE 10/30/2003 RULE | C | CLASS 398 | GRO | FROUP ART UNIT 2613 | | ATTORNEY DOCKET NO. POU920030031US1 | |
|--|---|---------------------------------------|----------|---------------------------|--|------------------------|----|---|--|
| APPLICANTS Casimer M. DeCusatis, Poughkeepsie, NY; Lawrence Jacobowitz, Wappingers Falls, NY; ** CONTINUING DATA ********************************** | | | | | | | | | |
| Foreign Priority claimed yes no 35 USC 119 (a-d) conditions yes no Met after met Verified and Acknowledged Examiner's Signature Initials | | | | STATE OR COUNTRY NY | SHEETS TOT DRAWING CLA 7 2 | | MS | INDEPENDENT CLAIMS 4 | |
| ADDRESS 46369 | | | | | | | | | |
| TITLE Byte-wide optical | back | olane switch and switcl | ning met | hod | | | | | |
| RECEIVED IN | FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following: | | | | ☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other ☐ Credit | | | | |